

Town of Hollywood Park Golf Cart Permit Application



Permit Number: _____

Date of Application:		ŀ		
Applicant Name: Last:		First:		Middle Initial:
Applicant Address:				
Stree Applicant Phone Number: (2)	eet	City	State	Zip _(Work)
Date of Birth: Driver's Licen		e #:		State:
E-mail Address:				
Address if golf cart is stored	l at a different location: (t	han above:		
Stre	eet	City	State	Zip
	Golf Cart	Informa	ıtion	
Vehicle Identification Numb	per and or Serial Number:	3-		
Year: Make:	Model:	Colo	or:	Color:
Electric or Gas:	Identifying Featur	es (if applicabl	!e):	
	Do Not Write Below	v Line - Offi	ce Use Only	
Required Inspection Items	:			
☐ Headlamps (two required	d) Tail lamps (two red	quired) 🗆 Slo	w-Moving Emb	lem Parking Brake
☐ Side Reflectors-each side	e (2 front-amber color / 2	rear-red color)	☐ Horn (capal	ble of being heard at 200 feet)
☐ Rear View Mirror (unob	structed view to 200 feet)	☐ Muffler S	ystem (gas)	
Notes:				
☐ Pass Inspected	l By:			
☐ Fail Date:				
Fee: Initial Inspection \$ 50.0	00 Re-Inspection \$ 10.0	00		
□ Pass Re-Inspec	cted By:			
	ction Date:			